

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET

SERIAL NO.

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		1ST CNDY AMENDMENT		2ND CNDY AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1					
2	1					
3	1					
4	1					
5	1					
6	1					
7	1					
8	1					
9	1					
10	1					
11	10					
12	10					
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49						
50						
TOTAL IND.	1					
TOTAL DEP.	29	←	←	←		
TOTAL CLAIMS	30	QR	QR	QR	QR	QR

1	2	3	4	5	6	7	8
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100							
TOTAL IND.							
TOTAL DEP.		←	←	←			
TOTAL CLAIMS		QR	QR	QR	QR	QR	QR